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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMB control number. on or Docket Alamin PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875 OTHER THAN APPLICATION AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 1) (Column 2) FOR NUMBER FILED NUMBER EXTRA RATE (\$) FEE (\$) RATE (\$) FEE (\$) BASIC FEE (37 CFR 1.16(a), (b), or (c)) SEARCH FEE (37 CFR 1.16(k), (i), or (m)) **EXAMINATION FEE** (37 CFR 1.16(o), (p), or (q)) **TOTAL CLAIMS** OR minus 20 = (37 CFR 1.16(i)) INDEPENDENT CLAIMS = х = (37 CFR 1.16(h)) minus 3 = If the specification and drawings exceed 100 sheets of paper, the application size fee due APPLICATION SIZE is \$250 (\$125 for small entity) for each (37 CFR 1.16(s)) additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j)) * If the difference in column 1 is less than zero, enter "0" in column 2. **TOTAL** TOTAL APPLICATION AS AMENDED - PART II OTHER THAN OR (Column 2) (Column 3) (Column 1) SMALL ENTITY SMALL ENTITY **PRESENT** REMAINING NUMBER RATE (\$) ADDI-RATE (\$) ADDI-AFTER **PREVIOUSLY** EXTRA TIONAL TIONAL ENT AMENDMENT PAID FOR FEE (\$) FEE (\$) Total (37 CFR 1.16(i)) Minus ENDM OR Minus = = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE (Column 1) (Column 2) (Column 3) CLAIMS HIGHEST **PRESENT** RATE (\$) REMAINING NUMBER ADDI-RATE (\$) ADDI-മ **EXTRA** TIONAL FEE (\$) AFTER **PREVIOUSLY** TIONAL FEE (\$) ENT AMENDMENT PAID FOR Total (37 CFR 1.16(i)) Minus ENDM = OR х Independent (37 CFR 1.16(h)) Minus = OR Application Size Fee (37 CFR 1.16(s)) FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j)) OR TOTAL TOTAL OR ADD'L FEE ADD'L FEE * If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

								Application or Docket Number					
	PATENT A		34114.800545										
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			39				ſ	RATE	FEE		RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			39 minus 20=		. 19			X\$ 9=	开	OR	X\$18=		
INDEPENDENT CLAIMS			\5 minus 3 =		. 19			X40=	480	OR	X80=		
MU	LTIPLE DEPEN	DENT CLAIM'PI	RESENT					+135=	, - 0 -	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOTAL	1006	OR	TOTAL		
CLAIMS AS AMENDED - PART II								OTHER THAN					
	(Column 1) (Column 2) (Column 3) CLAIMS HIGHEST							SMALL		OR.	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 39	Minus	-3	39	- 15		X\$ 9=		OR	X\$18=		
	Independent	. 15	Minus	···/:	5	<u>- Q</u>		X40=		OR	X80 =		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
										OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)							ADDIT. FEE		4	ADDII. 1 CC		
ENT B		CLAIMS REMAINING AFTER AMENDMENT		NUA PREVI	HEST MBER HOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N	Total	. 29	Minus		39	= /	11	X\$ 9=		OR	X\$18=		
AMENDMENT	Independent	. 15	Minus	··· /2	5	=/]	X40=		OR	X80=		
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM /							+135=	•	O.R	+270=		
								TOTAL ADDIT. FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)								,				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUI PREV	HEST MBER NOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	.39	Minus	. 3	39	=		X\$ 9=		OR	X\$18=	,	
	Independent	1. 15	Minus		5	-/		X40=		OR	X80=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=		
:	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. " If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."									OR	TOTAL		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE												-	